UTILITY		
PATENT APPLICAT	IO	N
TRANSMITTAL		

35.C15084 Attorney Docket No.

First Named Inv	entor or Application Identifier		_
MASAAKI KOBAYASHI		<u>.</u>	_
Express Mail Label No.		<u> </u>	,
ADDRESS TO:	Commissioner for Patents Box Patent Application Washington, DC 20231	C841 09/1	
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	TRANSM	NSMITTAL MASAAKI KOBAYASHI						
(Only fo	or new nonprovisional applic	ations under 37 CFR 1.53(b))	Expres	Express Mail Label No.			<u>" </u>	
is impe	APPLICATION P chapter 600 concerning u	I ELEMENTS tility patent application contents.	ΑI	DDRE	SS TO:	Commissior Box Patent Washington		jc841 09/7
	Fee Transmittal Form (Submit an original, and a dupli	icate for fee processing)	7.		CD-ROM or Program (Ap	CD-R in duplicate, pendix)	large table or C	
2.	Applicant claims small entire See 37 CFR 1.27.	ty status.	8. [nd/or Amino Acid S , all necessary)	Sequence Subn	mission
3. X	Specification	Total Pages 40			<u> </u>	omputer Readable tion Sequence Listi		
4. X	Drawing(s) (35 USC 113)	Total Sheets 12				D-ROM or CD-R (2		
5.	Oath or Declaration	Total Pages				aper		
	a. Newly executed	(original or copy)				tatements verifying		
	L ——— O from a pris	or application (37 CER 1.63(d))	-		ACCOMF	PANYING APPLICA	ATION PARTS	···
	(for continuation/	or application (37 CFR 1.63(d)) divisional with Box 17 completed)	9.		Assignment P	apers (cover sheet &	document(s))	
	[Note Box	TION OF INVENTOR(S)	10.		37 CFR 3.73((when there	b) Statement is an assignee)	Powe	er of Attorney
	Signed	Statement attached deleting invent			English Trar	nslation Document	(if applicable)	
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).			12	Information Disclosure Copies of IDS				
6. X	Statement (IDS)/P10-1449 — Citations					10115		
	14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)							
			15			py of Priority Docu iority is claimed)	ment(s)	
			16		Other:			
17 If a	CONTINUING APPLICATION	ON, check appropriate box and s	upply the n	equisite	information:			
	Continuation	T			of prior app	lication No/		
considere	ed a part of the disclosure of the	APPS only: The entire disclosure of e accompanying continuation or divisured in the submitted from the submitted from the submitted.	sional applic	ation and	from which an	oath or declaration is rporated by reference	s supplied under e. The incorpora	Box 5b, is ation can only be
		18. CORRE	SPONDEN	CE ADD				<u> </u>
х	X Customer Number or Bar Code Label (insert Customer Nouror Attach bar code label here) or Correspondence address below							
NAME								
Address	s -							
City		State				Zip Code		
Country	/	Telephone				Fax		

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS		
	TOTAL CLAIMS (37 CFR 1.16(c))	93-20 =	73	X \$ 18.00 =	\$ 1314.00		
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	8-3 =	5	X \$ 80.00 =	\$ 400.00.99		
	MULTIPLE DEPENDENT	T CLAIMS (if applicable) (37 (CFR 1.16(d))	\$270.00 =	\$ 270.00		
100		BASIC FEE (37 CFR 1.16(a))	\$ 710.00				
	Special Section of the property of the section of t						
	Reduction by	50% for filing by small en	tity (Note 37 CFR 1.9, 1	.27, 1.28).			
					\$ 2694.00		
	TOTAL = \$ 2094.00						
19. Small entity status							
	ian entity status						
a.		ntity statement is enclosed	ť				
	A small en	ntity statement was filed in		al application and suc	h status is still proper		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
NAME	Christopher Philip Wrist - Reg. No. 32,078			
SIGNATURE	Clesh Sen			
DATE	January 29, 2001			

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